FOR INSTRUCTIONS, SEE BACK OF FORM	FORM
DISCLOSURE SUMMARY PAGE IA ETHICS AND	DR-2 DISCLOSURE REPORT
- Tangang Ang Ang Ang Ang Ang Ang Ang Ang Ang A	For Office Use Only
SMMITTEE NAME (Must be same as on Statement of Organization2010 MAY 19 AM 10: 2	8 Comm. #
Louisa County Democrato Central Committee	Indexed 5
IMPORTANT: Indicate type of committee you are reporting for:	Audited
(1)Statewide/Legislative Candidate (2)Statewide PAC (3)State Party (4)County/Local Candidate	Computer
(5) County PAC (6) Ballot Issue/Franchise Committee (7) County/City Central Committee (8) Support State of Candidates	
Connie Ostiniman (319)729-4271	may 17, 2010
SIGNATURE OF TREASURER (or person filing this report) TELEPHONE	DATE SIGNED
Routine Penalties Due For Late Filed Reports Range from	\$20 to \$400
SEE INSTRUCTIONS ON BACK AND COMPLETE THE FOLLOWING SENTENCE:	
I AM FILING A 19 2010 REPORT FOR ANA (1) ELECTION	ON //2\NON-ELECTION YEAR
	one [
CHECK IF AMENDMENT TO REPORT DATED Local	Committees, enter Date of Election
Theory is this is usual (remaination) report and attach notice of dissolution from pin-s.	ty & Local Committees, enter County in
(You must continue to file reports until a Notice of Dissolution is filed.)	Libraria
STATEMENT OF CASH ON HAND	
CASH ON HAND at the beginning of the reporting period. (This is the total of all monies held by the committee. This amount MUST be the same as the cash on hand at the end of the last reporting period,	
or must be zero if this is first report filed.)	\$ <u>435,13</u>
ADD TOTAL MONEY TAKEN IN THIS PERIOD	. ======
Schedule A: Cash Contributions total (Attach Schedule A)	
Schedule F: Loans Received total (Attach Schedule F)	
Schedule H: Total Sales of Campaign Property (Attach Schedule H)	•••
(Schedule H applies to Candidates' Committees Only)	
SUB-TOTAL	1.021.81
SUBTRACT TOTAL MONEY SPENT THIS PERIOD	•
Schedule B: Expenditures total (Attach Schedule B)	
Schedule F: Loan Repayments total (Attach Schedule F)	
CASH ON HAND at the end of this reporting period (if final report, balance must be zero) (Attach DR-3)	\$ 729,01
UNPAID BILLS (From Schedule D - Attach Schedule D)	\$
IN KIND CONTRIBUTIONS (From Schedule E - Attach Schedule E)	·

___ YES ____ NO

OUTSTANDING LOANS (From Schedule F - Attach Schedule F)\$

ANDIDATE COMMITTEES ONLY:

CONSULTANT BREAKDOWN (Schedule G Attached?)

VALUE OF CAMPAIGN PROPERTY (From Schedule H - Attach Schedule H)

For Instructions, See Back of Form	SCHEDULE	
CONTRIBUTIONS MONEY TAKEN IN (Including candidate's personal funds)	A (Rev. 06/97)	MONETARY RECEIPTS
COMMITTEE NAME (Must be same as on Statement of Organization) Socioa County Democrato Central Committee		CK THIS BOX IF VOING FORM
STATE CANDIDATES NOTE: IF A CONTRIBUTION IS DESCRIBED FROM A STATE OF THE STATE OF		

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

CAUTION: Section 68B.32A(6), lowa Code, prohibits the use of information copied from reports and statements for soliciting contributions or for any commercial purpose by any person other than statutory political committees.

DATE RECEIVED (MM/DD/YR)	PAC ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED	√ IF FOR FUND- RAISER INCOME
01/28/10	ID# CK#	Uniterrized Contributions		\$ co.or	<u> </u>
صاعداه	ID# CK#	Uniterrized Contributions		\$32¢.¢8	✓ /
03/18/10	ID# CK#	Uniternized Contributions		\$ 70.00	·
03/29/10	ID# CK#	Unitemized Contributions		2 70°C	✓ /
	ID# CK#				
	ID# CK#			·	
	ID#				
	ID#				
	CK#				
	CK#				
	CK#		OUD TOTAL		

TOTAL (if last page of this schedule)

SUB-TOTAL

\$586.68

Page of (for Schedule A)

^{*} Disclosure law requires candidate committees to disclose the relationship of any relative making a contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage) (See Page 2 of forms packet.). If surname of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.

FOR INSTRUCTIONS, SEE BACK OF FORM

EXPENDITURES -- MONEY SPENT FROM COMMITTEE ACCOUNT

TE PAC COMMITTEES: NOTE: FOR CONTRIBUTIONS MADE TO STATEWIDE OR LEGISLATIVE CANDIDATES, LIST THE CANDIDATE IDENTIFICATION NUMBER IN THE DESIGNATED COLUMN AND THE PAC CHECK NUMBER FOR EACH EXPENDITURE. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS & CAMPAIGN DISCLOSURE BOARD.

SCHEDULE B (Rev. 09/97)	MONETARY EXPENDITURES
	CK THIS BOX IF

COMMITTEE NAME (Must L	oe same as on Statement of	f Organization)	
Souisa County	Democrato (entral	Committee

DATE EXPENDED (MM/DD/YR)	CANDIDATE ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS TO WHOM EXPENDITURE (Disbursement) WAS MADE	PURPOSE (DESCRIBE TRANSACTION)	AMOUNT EXPENDED
oulosko	ID#	Don Foor 380 S. Nebracka LUTO, IA 52754	Woodrow Ishearer flowers	\$42.80
04/05/10	CK# 339	hoebsack For Congress	campaign fund	\$100.00
очюбю	CK#,340	Levelopment Courty P.O. Box 171 Wapello IA 52653	membership fee	\$ 50.∞
صامحان	ID#	Louisa County Fair Bla Union Street Columbus Jet. IA5273	2010 Fair Sponson Rkg.	<u>₹</u> 100.00
	ID# CK#			
			SUB-TOTAL	\$ 292 80

SUB-TOTAL \$292.80

TOTAL (If last page of this schedule)

THIS BOX APPLIES TO CANDIDATES' COMMITTEES ONLY:

Purchases of certain campaign property costing \$500 or more must also be inventoried on Schedule H. (Refer to Schedule H instructions.)

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penditures to persons/entities providing consulting, advertising, fund-raising, polling, managing, organizing services must also be detail itemized on schedule G by the amount, purpose, and date of each type of expenditure made by the person/entity on behalf of the candidate's committee. (Refer to Schedule G instructions and lowa Code 56.6(3)(I).)

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